

OBJECTION TO APPLICATION

INSTRUCTIONS

Use this form when objecting to an application for a water use permit, change authorization or reservation of water. Use one form for each application.

A person has standing to file an objection if his or her property, water rights, or interests would be adversely affected by the proposed appropriation. Individual water right owners must file separate objections.

A CORRECT AND COMPLETE OBJECTION FORM MUST BE RECEIVED OR POSTMARKED ON OR BEFORE THE DEADLINE SPECIFIED IN THE PUBLIC NOTICE.

FILING FEE: \$25.00

FOR DEPARTMENT USE ONLY

Postmarked Date _____

Date Received _____

Rec'd By _____

Fee Rec'd _____

Check No. _____

Refund _____

1. NAME OF OBJECTOR _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Other Phone _____

- 2. APPLICATION BEING OBJECTED TO:** Number _____

Applicant Name: _____

- ### 3. STATE THE FACTUAL BASIS OF YOUR OBJECTION

- a) **OBJECTION TO PERMIT APPLICATION** must provide facts tending to show one or more of the criteria in Section 85-2-311, MCA are not met.
- b) **OBJECTION TO CHANGE APPLICATION** must provide facts tending to show one or more of the criteria in Section 85-2-402, MCA are not met.

NOTE: Water quality objections must contain substantial credible information establishing to the satisfaction of the department that the water quality criteria cannot be met by the applicant.

[illegible]

4. **STATE THE BASIS OF YOUR WATER RIGHT**, if you are claiming your water right will be affected.

- ☐ (W) Statement of Claim No. _____
- ☐ (P) Permit to Appropriate Water No. _____
- ☐ (C) Certificate of Water Right No. _____
- ☐ (D) Final Decree No. _____
- ☐ (M/R) Reservation of Water No. _____
- ☐ (E) Exempt Existing Water Right (no claim filed; complete items below)

THIS INFORMATION ONLY REQUIRED FOR EXEMPT RIGHTS.	Date of First Use: _____
	Name of Appropriator: _____
	Type of Use: Stock <input type="checkbox"/> Domestic <input type="checkbox"/>
	Amount Used: Flow Rate _____ Gallons Per Minute; Volume _____ Acre-Feet
	Point of Diversion: _____ _____ 1/4 _____ 1/4 _____ 1/4 Section _____, Twp _____ N/S, Rge _____ E/W, _____ County
	Lot _____ Block _____ Tract No. _____ Subdivision Name _____

5. **STATE ANY CONDITIONS OR MODIFICATIONS UNDER WHICH YOU WOULD AGREE TO THE ISSUANCE OF THE PERMIT OR AUTHORIZATION TO CHANGE.**

6. **ARE YOU REPRESENTED BY COUNSEL?** YES ☐ NO ☐ 7. **PERSON PREPARING THIS FORM**, if different from objector

Name _____	Name _____
Mailing Address _____	Mailing Address _____
City, State, Zip _____	City, State, Zip _____
Phone _____	Phone _____

8. **OBJECTOR'S SIGNATURE** _____ **DATE** _____

WATER RESOURCES REGIONAL OFFICES

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1371 Rimtop Drive
Billings, MT 59105-1978
Phone: 406-247-4415
Fax: 406-247-4416
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Phone: 406-538-7459
Fax: 406-538-7089
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Fax: 406-587-9726
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1424 9th Avenue
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Helena, MT 59620-1601
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Missoula

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Phone: 406-721-4284
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Glasgow, MT 59230-1269
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For Mailing, Use Post Office Box Number.